

**APPLICATION FOR THE
BEN AVERY FIREARMS SAFETY AND EDUCATION PROGRAM**

The Ben Avery Shooting Facility provides a quality firearms safety program through our mobile training trailer. Requests for this program exceed our capability to provide this service. Please fill out this application completely and print legibly.

Date(s) of Event: _____ Time(s) of Event(s): _____

Name of Event and Group Leader: _____
(Please print full name)

Name of School or Organization: _____

Address Location of Event: _____

City State Zip Code

() _____ Ext. _____ () _____
Work Phone Home Phone

_____ () _____
Email Address Other phone (pager, cell; please specify) _____

Please list the County that your school or organization is located in: _____

The more open and flexible you can be in scheduling a Safety program, the better we can serve you. If you have a specific date or range of dates that limit when you can schedule a Safety program, please list the date(s) and type of your event here. _____

Additional comments or considerations: _____

IF YOU ARE NOT A SCHOOL PLEASE CHECK ✓ AND COMPLETE THE FOLLOWING:
Age range of participants: _____ Total number of participants: _____

IF YOU ARE A SCHOOL PLEASE CHECK ✓ AND COMPLETE THE FOLLOWING:
Number of students for each grade level: _____

Please complete the above form and return to:

Ben Avery Shooting Facility
Attention: Outreach Coordinator
4044 W. Black Canyon Boulevard
Phoenix, Arizona 85086
http://www.azgfd.gov/outdoor_recreation/ben_avery.shtml

Work: (623) 582-8313
Fax: (623) 582-5317
Email: kford@azgfd.gov